

Form 990

## Return of Organization Exempt From Income Tax

2007

Open to Public  
InspectionDepartment of the  
Treasury  
Internal Revenue  
ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

**A For the 2007 calendar year, or tax year beginning 10-01-2007 and ending 09-30-2008****B Check if applicable** Address change Name change Initial return Final return Amended return Application pending**Please use IRS label or print or type. See Specific Instructions.****C Name of organization**  
International Republican Institute**D Employer identification number**  
52-1340267**E Telephone number**  
(202) 408-9450**F Accounting method**  Cash  Accrual  
 Other (specify) ►

\* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G Web site:** ► www.iri.org**J Organization type** (check only one) ►  501(c) (3) (insert no)  4947(a)(1) or  527**K** Check here ►  if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return**L Gross receipts** Add lines 6b, 8b, 9b, and 10b to line 12 ► 81,780,964**H and I** are not applicable to section 527 organizations**H(a)** Is this a group return for affiliates?  Yes  No**H(b)** If "Yes" enter number of affiliates ►**H(c)** Are all affiliates included?  Yes  No  
(If "No," attach a list. See instructions.)**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No**I Group Exemption Number** ►**M** Check ►  if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)**

1 Contributions, gifts, grants, and similar amounts received			
a Contributions to donor advised funds . . . . .	1a		
b Direct public support (not included on line 1a) . . . . .	1b	645,268	
c Indirect public support (not included on line 1a) . . . . .	1c		
d Government contributions (grants) (not included on line 1a)	1d	81,079,484	
e <b>Total</b> (add lines 1a through 1d) (cash \$ 81,724,752 noncash \$ _____)	1e	81,724,752	
2 Program service revenue including government fees and contracts (from Part VII, line 93) .	2		
3 Membership dues and assessments . . . . .	3		
4 Interest on savings and temporary cash investments . . . . .	4	56,212	
5 Dividends and interest from securities . . . . .	5		
6a Gross rents . . . . .	6a		
b Less rental expenses . . . . .	6b		
c Net rental income or (loss) subtract line 6b from line 6a . . . . .	6c		
7 Other investment income (describe ►) . . . . .	7		
8a Gross amount from sales of assets other than inventory . . . . .	(A) Securities	(B) Other	
b Less cost or other basis and sales expenses	8a		
c Gain or (loss) (attach schedule) . . . . .	8b		
d Net gain or (loss) Combine line 8c, columns (A) and (B) . . . . .	8c		
9 Special events and activities (attach schedule) If any amount is from <b>gaming</b> , check here ►			
a Gross revenue (not including \$ _____ of contributions reported on line 1b) . . . . .	9a		
b Less direct expenses other than fundraising expenses . . . . .	9b		
c Net income or (loss) from special events Subtract line 9b from line 9a . . . . .			
10a Gross sales of inventory, less returns and allowances . . . . .	10a		
b Less cost of goods sold . . . . .	10b		
c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a . . . . .			
11 Other revenue (from Part VII, line 103) . . . . .	11		
<b>12 Total revenue</b> Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 . . . . .	12	81,780,964	
13 Program services (from line 44, column (B)) . . . . .	13	72,975,290	
14 Management and general (from line 44, column (C)) . . . . .	14	8,629,386	
15 Fundraising (from line 44, column (D)) . . . . .	15		
16 Payments to affiliates (attach schedule) . . . . .	16		
<b>17 Total expenses</b> Add lines 16 and 44, column (A) . . . . .	17	81,604,676	
18 Excess or (deficit) for the year Subtract line 17 from line 12 . . . . .	18	176,288	
19 Net assets or fund balances at beginning of year (from line 73, column (A)) . . . . .	19	2,614,745	
20 Other changes in net assets or fund balances (attach explanation) ► . . . . .	20	25,225	
21 Net assets or fund balances at end of year Combine lines 18, 19, and 20 . . . . .	21	2,816,258	

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	<b>22a</b>			
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ 2,417,455 noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	<b>22b</b>	2,417,455	2,417,455	
<b>23</b> Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b> Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b> Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule) . . . . .	<b>25a</b>	1,178,230	838,077	340,153
<b>b</b> Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule) . . . . .	<b>25b</b>			
<b>c</b> Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>			
<b>26</b> Salaries and wages of employees not included on lines 25a, b and c . . . . .	<b>26</b>	10,980,085	7,810,153	3,169,932
<b>27</b> Pension plan contributions not included on lines 25a, b and c . . . . .	<b>27</b>	963,380	685,254	278,126
<b>28</b> Employee benefits not included on lines 25a - 27 . . . . .	<b>28</b>	2,841,607	2,021,241	820,366
<b>29</b> Payroll taxes . . . . .	<b>29</b>	998,336	710,118	288,218
<b>30</b> Professional fundraising fees . . . . .	<b>30</b>			
<b>31</b> Accounting fees . . . . .	<b>31</b>			
<b>32</b> Legal fees . . . . .	<b>32</b>			
<b>33</b> Supplies . . . . .	<b>33</b>	830,571	751,965	78,606
<b>34</b> Telephone . . . . .	<b>34</b>	870,802	746,580	124,222
<b>35</b> Postage and shipping . . . . .	<b>35</b>	242,472	226,449	16,023
<b>36</b> Occupancy . . . . .	<b>36</b>	6,335,735	4,521,817	1,813,918
<b>37</b> Equipment rental and maintenance . . . . .	<b>37</b>	1,528,021	1,300,226	227,795
<b>38</b> Printing and publications . . . . .	<b>38</b>	656,679	609,499	47,180
<b>39</b> Travel . . . . .	<b>39</b>	11,618,155	11,344,930	273,225
<b>40</b> Conferences, conventions, and meetings . . . . .	<b>40</b>	3,060,616	3,016,432	44,184
<b>41</b> Interest . . . . .	<b>41</b>			
<b>42</b> Depreciation, depletion, etc (attach schedule) <b>43</b> Other expenses not covered above (itemize)	<b>42</b>	125,622		125,622
<b>a</b> See Additional Data Table	<b>43a</b>			
<b>b</b>	<b>43b</b>			
<b>c</b>	<b>43c</b>			
<b>d</b>	<b>43d</b>			
<b>e</b>	<b>43e</b>			
<b>f</b>	<b>43f</b>			
<b>g</b>	<b>43g</b>			
<b>44</b> <b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15) . . . . .	<b>44</b>	81,604,676	72,975,290	8,629,386
				0

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments (See the instructions.)**

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

<p><b>What is the organization's primary exempt purpose?</b></p> <p>A nonprofit, nonpartisan organization, the International Republican Institute (IRI) advances freedom and democracy worldwide by developing political parties, civic institutions, open elections, good governance and the rule of law</p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others )</p>		<b>Program Service Expenses</b> <small>(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others )</small>
<p><b>a</b> IRI provides grants to support the efforts of groups who encourage and foster democratic institutions throughout the world</p> <p>(Grants and allocations \$ 2,417,455)</p>		<p>If this amount includes foreign grants, check here <input checked="" type="checkbox"/></p> <p>72,975,290</p>
<p><b>b</b> _____ _____</p> <p>(Grants and allocations \$ )</p>		<p>If this amount includes foreign grants, check here <input type="checkbox"/></p>
<p><b>c</b> _____ _____</p> <p>(Grants and allocations \$ )</p>		<p>If this amount includes foreign grants, check here <input type="checkbox"/></p>
<p><b>d</b> _____ _____ _____</p> <p>(Grants and allocations \$ )</p>		<p>If this amount includes foreign grants, check here <input type="checkbox"/></p>
<p><b>e</b> Other program services (attach schedule) (Grants and allocations \$ )</p>		<p>If this amount includes foreign grants, check here <input type="checkbox"/></p>
<p><b>f</b> <b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . .</p>		<p>72,975,290</p>

**Part IV Balance Sheets (See the instructions.)**

<b>Note:</b>	<i>Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.</i>	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
<b>45</b>	Cash—non-interest-bearing . . . . .	6,537,250	<b>45</b>	5,920,007
<b>46</b>	Savings and temporary cash investments . . . . .		<b>46</b>	
<b>47a</b>	Accounts receivable . . . . .	<b>47a</b> 774,322		
<b>b</b>	Less allowance for doubtful accounts . . . . .	<b>47b</b>	506,464	<b>47c</b> 774,322
<b>48a</b>	Pledges receivable . . . . .	<b>48a</b>		
<b>b</b>	Less allowance for doubtful accounts . . . . .	<b>48b</b>		<b>48c</b>
<b>49</b>	Grants receivable . . . . .		<b>49</b> 5,974,859	5,371,146
<b>50a</b>	Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>50a</b>
<b>b</b>	Receivables from other disqualified persons (as defined under section 4958(c)(3)(B)) (attach schedule) . . . . .			<b>50b</b>
<b>51a</b>	Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>		
<b>b</b>	Less allowance for doubtful accounts . . . . .	<b>51b</b>		<b>51c</b>
<b>52</b>	Inventories for sale or use . . . . .			<b>52</b>
<b>53</b>	Prepaid expenses and deferred charges . . . . .		689,958	<b>53</b> 732,088
<b>54a</b>	Investments—publicly-traded securities . . . . .	<input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54a</b>
<b>b</b>	Investments—other securities (attach schedule) . . . . .	<input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54b</b>
<b>55a</b>	Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>		
<b>b</b>	Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>
<b>56</b>	Investments—other (attach schedule) . . . . .			<b>56</b>
<b>57a</b>	Land, buildings, and equipment basis . . . . .	<b>57a</b> 934,773		
<b>b</b>	Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 618,089	418,654	<b>57c</b> <input checked="" type="checkbox"/> 316,684
<b>58</b>	Other assets, including program-related investments (describe <input checked="" type="checkbox"/> _____ ) . . . . .		127,866	<b>58</b> <input checked="" type="checkbox"/> 120,883
<b>59</b>	<b>Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .		14,255,051	<b>59</b> 13,235,130
<b>60</b>	Accounts payable and accrued expenses . . . . .		4,887,020	<b>60</b> 4,844,607
<b>61</b>	Grants payable . . . . .		561,486	<b>61</b> 900,045
<b>62</b>	Deferred revenue . . . . .		5,466,975	<b>62</b> 4,025,120
<b>63</b>	Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>63</b>
<b>64a</b>	Tax-exempt bond liabilities (attach schedule) . . . . .			<b>64a</b>
<b>b</b>	Mortgages and other notes payable (attach schedule) . . . . .			<b>64b</b>
<b>65</b>	Other liabilities (describe <input checked="" type="checkbox"/> _____ ) . . . . .		724,825	<b>65</b> <input checked="" type="checkbox"/> 649,100
<b>66</b>	<b>Total liabilities</b> Add lines 60 through 65 . . . . .		11,640,306	<b>66</b> 10,418,872
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/></b> and complete lines 67 through 69 and lines 73 and 74			
	<b>67</b> Unrestricted . . . . .		2,519,718	<b>67</b> 2,678,205
	<b>68</b> Temporarily restricted . . . . .		95,027	<b>68</b> 138,053
	<b>69</b> Permanently restricted . . . . .			<b>69</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/></b> and complete lines 70 through 74			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .			<b>70</b>
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .			<b>71</b>
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>72</b>
<b>73</b>	<b>Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .		2,614,745	<b>73</b> 2,816,258
<b>74</b>	<b>Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .		14,255,051	<b>74</b> 13,235,130

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)**

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>a</b>	81,987,781
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12		
<b>1</b>	Net unrealized gains on investments . . . . .	<b>b1</b>	
<b>2</b>	Donated services and use of facilities . . . . .	<b>b2</b>	206,817
<b>3</b>	Recoveries of prior year grants . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	206,817
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	81,780,964
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b>		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	206,817
<b>e</b>	<b>Total revenue</b> (Part I, line 12) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	81,780,964

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . .	<b>a</b>	81,786,268
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17		
<b>1</b>	Donated services and use of facilities . . . . .	<b>b1</b>	206,817
<b>2</b>	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20 . . . . .	<b>b3</b>	
<b>4</b>	Other (specify) _____	<b>b4</b>	
	Add lines <b>b1</b> through <b>b4</b> . . . . .	<b>b</b>	206,817
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .	<b>c</b>	81,579,451
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>	
<b>2</b>	Other (specify) _____	<b>d2</b>	25,225
	Add lines <b>d1</b> and <b>d2</b> . . . . .	<b>d</b>	25,225
<b>e</b>	<b>Total expenses</b> (Part I, line 17) Add lines <b>c</b> and <b>d</b> . . . . .	<b>e</b>	81,604,676

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation <b>(If not paid, enter -0-.)</b>	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

**Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)**

**Yes** **No**

- |     |  |     |     |    |  |
|-----|--|-----|-----|----|--|
| 75a | Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . .   | ►26 |     |    |  |
| b   | Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) .                                    | 75b |     | No |  |
| c   | Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" . . . . . | 75c |     | No |  |
| d   | If "Yes," attach a statement that includes the information described in the instructions   | 75d | Yes |    |  |
|     |  |     |     |    |  |

**Part V-B** **Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

**Part VI Other Information** (See the instructions.)

**X<sub>22</sub>**      **N<sub>22</sub>**

- |            |  |            |     |    |
|------------|--|------------|-----|----|
| <b>76</b>  | Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .   | <b>76</b>  |     | No |
| <b>77</b>  | Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . .<br>If "Yes," attach a conformed copy of the changes  | <b>77</b>  |     | No |
| <b>78a</b> | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .   | <b>78a</b> |     | No |
| <b>b</b>   | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .  | <b>78b</b> |     |    |
| <b>79</b>  | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .  | <b>79</b>  |     | No |
| <b>80a</b> | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization? . . . . .    | <b>80a</b> | Yes |    |
| <b>b</b>   | If "Yes," enter the name of the organization ► <u>Consortium for Elections &amp; Political Process Strengthening</u><br>_____ and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt |            |     |    |
| <b>81a</b> | Enter direct or indirect political expenditures (See line 81 instructions ) . . . . .  | <b>81a</b> |     |    |
| <b>b</b>   | Did the organization file <b>Form 1120-POL</b> for this year? . . . . .  | <b>81b</b> |     | No |

**Part VI Other Information (continued)**

	<b>Yes</b>	<b>No</b>
<b>82a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		
<b>b</b> If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	<b>82b</b>	206,817
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?		
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible?		
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>85</b> <i>501(c)(4), (5), or (6) organizations.</i> <b>a</b> Were substantially all dues nondeductible by members?		
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
If "Yes," was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year		
<b>c</b> Dues assessments, and similar amounts from members	<b>85c</b>	
<b>d</b> Section 162(e) lobbying and political expenditures	<b>85d</b>	
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	<b>85e</b>	
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	<b>85f</b>	
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
<b>86</b> <i>501(c)(7) orgs.</i> Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>	
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	<b>86b</b>	
<b>87</b> <i>501(c)(12) orgs.</i> Enter <b>a</b> Gross income from members or shareholders	<b>87a</b>	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>87b</b>	
<b>88a</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		
<b>b</b> At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI		
<b>89a</b> <i>501(c)(3) organizations</i> Enter Amount of tax imposed on the organization during the year under section 4911 ► <u>0</u> , section 4912 ► <u>0</u> , section 4955 ► <u>0</u>		
<b>b</b> <i>501(c)(3) and 501(c)(4) orgs.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► <u>0</u>		
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization ► <u>0</u>		
<b>e</b> <i>All organizations.</i> At any time during the tax year was the organization a party to a prohibited tax shelter transaction?		
<b>f</b> <i>All organizations.</i> Did the organization acquire direct or indirect interest in any applicable insurance contract?		
<b>g</b> <i>For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>90a</b> List the states with which a copy of this return is filed ► See Additional Data Table		
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions)	<b>90b</b>	207
<b>91a</b> The books are in care of ► <u>The Organization</u> Telephone no ► <u>(202) 408-9450</u>		
1225 Eye Street NW Suite 700 Located at ► <u>Washington, DC</u>	ZIP + 4 ► <u>20005</u>	
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		
If "Yes," enter the name of the foreign country ► <u> </u>		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts		
<b>91b</b>	<b>Yes</b>	<b>No</b>

**Part VI Other Information (continued)**

<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the United States?	<b>91c</b>	Yes	No
--	------------	-----	----

If "Yes," enter the name of the foreign country ► \_\_\_\_\_

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**—Check here . . . . . ►  and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ► **92**

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

**Note:** Enter gross amounts unless otherwise indicated.

**93** Program service revenue

a \_\_\_\_\_  
 b \_\_\_\_\_  
 c \_\_\_\_\_  
 d \_\_\_\_\_  
 e \_\_\_\_\_

**f** Medicare/Medicaid payments . . . . .

**g** Fees and contracts from government agencies

**94** Membership dues and assessments . . . . .

**95** Interest on savings and temporary cash investments

**96** Dividends and interest from securities . . . . .

**97** Net rental income or (loss) from real estate

**a** debt-financed property . . . . .

**b** non debt-financed property . . . . .

**98** Net rental income or (loss) from personal property

**99** Other investment income . . . . .

**100** Gain or (loss) from sales of assets other than inventory

**101** Net income or (loss) from special events . . . . .

**102** Gross profit or (loss) from sales of inventory

**103** Other revenue **a** \_\_\_\_\_

b \_\_\_\_\_  
 c \_\_\_\_\_  
 d \_\_\_\_\_  
 e \_\_\_\_\_

**104** Subtotal (add columns (B), (D), and (E)) . . . . .

**105 Total** (add line 104, columns (B), (D), and (E)) . . . . . ► \_\_\_\_\_

56,212

56,212

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

**Line No.** Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

**Part IX Information Regarding Taxable Subsidiaries and D**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	Nature
	%	
	%	
	%	
	%	

**Part X Information Regarding Transfers Associated with  
instructions.)**

**(a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums?

**(b)** Did the organization, during the year, pay premiums, directly or indirectly?

**NOTE:** If "Yes" to **(b)**, file Form 8870 and Form 4720 (see instructions).

**Part XI Information Regarding Transfers To and From Controlled Entities** Complete only if the organization is a controlling organization as defined in section 512(b)(13)

106	Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	<b>Yes</b>	<b>No</b>

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

107	Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	<b>Yes</b>	<b>No</b>

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

108	Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	<b>Yes</b>	<b>No</b>

<b>Please Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	*****	Date	2009-07-02
	Signature of officer		
sonya vekstein cfo			
Type or print name and title			

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN <input checked="" type="checkbox"/>
	RSM McGLADREY INC 8000 TOWERS CRESCENT DR STE 500 VIENNA, VA 221826205			Phone no <input checked="" type="checkbox"/> (703) 336-6400

**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust**Supplementary Information—(See separate instructions.)****2007**

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Department of the  
Treasury  
Internal Revenue  
Service

Name of the organization  
International Republican Institute

Employer identification number

52-1340267

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
lindsay lloyd 1225 eye st nw washington, DC 20005	regional director 40 00	121,553	17,697	0
cynthia bunton 1225 eye st nw washington, DC 20005	regional director 40 00	120,553	17,601	0
hans holzen 1225 eye st nw washington, DC 20005	regional country dir 40 00	130,142	28,191	2,550
thomas garrett 1225 eye st nw washington, DC 20005	regional director 40 00	124,161	17,713	0
stephen nix 1225 eye st nw washington, DC 20005	regional director 40 00	123,375	24,996	0
Total number of other employees paid over \$50,000 ►	137			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
blackwater security PO Box 1029 Moyock, NC 27958	security service	15,614,283
armfield harrison thomas inc 210 south king st leesburg, VA 20175	Life Insurance	597,996
global strategies group Oud Metha Tower 303 Sheikh Rashid Rd Dubai 1 AE	security service	497,275
Arab World for Research Developme Al-Irsal St Said Haifa Build 4 Floor 1 Ramallah 2238 WE	Research	493,659
Strategic Marketing Research 8 Gavrila Principa Beograd 11000 RB	Research	419,788
Total number of others receiving over \$50,000 for professional services ►	47	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
American Express PO BOX 360001 Ft Lauderdale, FL 333360001	credit card services	6,364,787
1225 Eye St Associates LLC PO BOX 890213 Charlotte, NC 282890213	real estate	1,842,567
Carefirst BCBS 840 First Street NE Washington, DC 20065	insurance	736,148
AETNA PO Box 21673 chicago, IL 60673	insurance	523,929
Agility International Inc 5270 Shawnee Road Suite A alexandria, VA 22312	logistics	443,461
Total number of other contractors receiving over \$50,000 for other services ►	20	

**Part III Statements About Activities** (See page 2 of the instructions.)**Yes** **No**

**1** During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ►\$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B )

<b>1</b>	No
----------	----

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

**2** During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a** Sale, exchange, or leasing property?
- b** Lending of money or other extension of credit?
- c** Furnishing of goods, services, or facilities?
- d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e** Transfer of any part of its income or assets?

<b>2a</b>	No
-----------	----

<b>2b</b>	No
-----------	----

<b>2c</b>	No
-----------	----

<b>2d</b>	Yes
-----------	-----

<b>2e</b>	No
-----------	----

**3a** Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )

<b>3a</b>	No
-----------	----

- b** Did the organization have a section 403(b) annuity plan for its employees?
- c** Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement
- d** Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

<b>3b</b>	Yes
-----------	-----

<b>3c</b>	No
-----------	----

<b>3d</b>	No
-----------	----

**4a** Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

<b>4a</b>	No
-----------	----

- b** Did the organization make any taxable distributions under section 4966?

<b>4b</b>	
-----------	--

- c** Did the organization make a distribution to a donor, donor advisor, or related person?

<b>4c</b>	
-----------	--

- d** Enter the total number of donor advised funds owned at the end of the tax year ►

►	_____
---	-------

- e** Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ►

►	_____
---	-------

- f** Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ►0

►0	_____
----	-------

- g** Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ►0

►0	_____
----	-------

**Part IV** **Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )

7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8  A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state ►**

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10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12  An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )

13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I       Type II       Type III - Functionally Integrated       Type III - Other

**Provide the following information about the supported organizations. (see page 7 of the instructions.)**

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					►

- 14**  An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

<b>Calendar year (or fiscal year beginning in)</b>	<b>(a) 2006</b>	<b>(b) 2005</b>	<b>(c) 2004</b>	<b>(d) 2003</b>	<b>(e) Total</b>
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28 )	74,333,200	87,794,561	75,788,489	36,395,245	274,311,495
<b>16</b> Membership fees received					0
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose					0
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	47,536	14,737	45,157		107,430
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
<b>23</b> Total of lines 15 through 22	74,380,736	87,809,298	75,833,646	36,395,245	274,418,925
<b>24</b> Line 23 minus line 17	74,380,736	87,809,298	75,833,646	36,395,245	274,418,925
<b>25</b> Enter 1% of line 23	743,807	878,093	758,336	363,952	

**26 Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ► **26a** 5,488,379

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ► **26b** 0

c Total support for section 509(a)(1) test Enter line 24, column (e) ► **26c** 274,418,925

d Add Amounts from column (e) for lines 18 107,430 19 0  
22 26b 0 ► **26d** 107,430

e Public support (line 26c minus line 26d total) ► **26e** 274,311,495

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ► **26f** 9996 09 %

**27 Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year

(2006) \_\_\_\_\_ (2005) \_\_\_\_\_ (2004) \_\_\_\_\_ (2003) \_\_\_\_\_

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger of (1)** the amount on line 25 for the year or **(2) \$5,000** (Include in the list organizations described in lines 5 through 11b, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1) or (2)**, enter the sum of these differences (the excess amounts) for each year

(2006) \_\_\_\_\_ (2005) \_\_\_\_\_ (2004) \_\_\_\_\_ (2003) \_\_\_\_\_

c Add Amounts from column (e) for lines 15 \_\_\_\_\_ 16 \_\_\_\_\_  
17 \_\_\_\_\_ 20 \_\_\_\_\_ 21 \_\_\_\_\_ ► **27c** \_\_\_\_\_

d Add Line 27a total \_\_\_\_\_ and line 27b total \_\_\_\_\_ ► **27d** \_\_\_\_\_

e Public support (line 27c total minus line 27d total) ► **27e** \_\_\_\_\_

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ► **27f** \_\_\_\_\_

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ► **27g** \_\_\_\_\_

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ► **27h** \_\_\_\_\_

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

**Part V Private School Questionnaire** (See page 7 of the instructions.)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	<b>Yes</b>	<b>No</b>
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )	<b>31</b>	
<b>32</b> Does the organization maintain the following  <b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? <b>b</b> Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis? <b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? <b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?	<b>32a</b>	
	<b>32b</b>	
	<b>32c</b>	
	<b>32d</b>	
<b>33</b> Does the organization discriminate by race in any way with respect to  <b>a</b> Students' rights or privileges? <b>b</b> Admissions policies? <b>c</b> Employment of faculty or administrative staff? <b>d</b> Scholarships or other financial assistance? <b>e</b> Educational policies? <b>f</b> Use of facilities? <b>g</b> Athletic programs? <b>h</b> Other extracurricular activities?	<b>33a</b>	
	<b>33b</b>	
	<b>33c</b>	
	<b>33d</b>	
	<b>33e</b>	
	<b>33f</b>	
	<b>33g</b>	
	<b>33h</b>	
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?  <b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<b>34a</b>	
	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b>	

**Part VI-A** **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions  
(To be completed ONLY by an eligible organization that filed Form 5768))

a if the organization belongs to an affiliated group       b if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		<b>(a)</b> Affiliated group totals	<b>(b)</b> To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred )			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table—	<b>41</b>	
<b>If the amount on line 40 is—</b>	<b>The lobbying nontaxable amount is—</b>		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution:** If there is an amount on either Line 13 or Line 14, you must file Form 1320.

**4-Year Averaging Period Under Section 501(h)**

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
See the instructions for lines 45 through 50 on page 11 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

## **Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including an attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
  - b** Paid staff or management (Include compensation in expenses reported on lines **c** through **g**)
  - c** Media advertisements
  - d** Mailings to members, legislators, or the public
  - e** Publications, or published or broadcast statements
  - f** Grants to other organizations for lobbying purposes
  - g** Direct contact with legislators, their staffs, government officials, or a legislative body
  - h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
  - i** Total lobbying expenditures (Add lines **c** through **h**)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

**Part VII** **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a** Transfers from the reporting organization to a noncharitable exempt organization or

- (i) Cash
  - (ii) Other assets

	<b>Yes</b>	<b>No</b>
<b>51a(i)</b>		No
<b>a(ii)</b>		No
<b>b(i)</b>		No
<b>b(ii)</b>		No
<b>b(iii)</b>		No
<b>b(iv)</b>		No
<b>b(v)</b>		No
<b>b(vi)</b>		No
<b>c</b>		No

- ## b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
  - (ii) Purchases of assets from a noncharitable exempt organization
  - (iii) Rental of facilities, equipment, or other assets
  - (iv) Reimbursement arrangements
  - (v) Loans or loan guarantees
  - (vi) Performance of services or membership or fundraising solicitations

<b>b(vi)</b>		No
<b>c</b>		No

- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

**52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes  No

**b** If "Yes," complete the following schedule.

**TY 2007 Cash Grants Paid Schedule****Name:** International Republican Institute**EIN:** 52-1340267

<b>Class of Activity</b>	<b>Recipient's name</b>	<b>Address</b>	<b>Amount</b>	<b>Relationship</b>
Grant USAID 201J-09110	Cambodia Youth Council of Cambodia 442-A-00-01-000131-00911011	112 B Street 173 Tuol Svay Prey Chamkaron Phnom Penh, 1 CB	104,052	
Grant USAID 201I-09110	Cambodia Voice of Democracy 442-A-00-01-0000131-0091109	No19 Street 287 Phnom Penh, 1 CB	255,637	
Grant USAID 2016-08074	Nicaragua IPADE DGC-A-00-01-00004-0080746	Carretera A Masaya Km 9 1/2 Managua, 1 NU	73,917	
Grant USAID 2015-08074	Nicaragua FIBRAS DGC-A-00-01-00004-0080745	Del Hospital Militar 1c al Lago 1c abajo 1c al sur y 12c abajo Frente Managua, 1 NU	60,000	
Grant USAID 2013-05871	Peru Calandria 527-A-00-08-00007587103	Cahuide 752 Jesus Maria Lima, 11 PE	149,533	
Grant USAID 2012-05871	Peru Proetica 527-A-00-08-00007587102	Manco Capac 826 Miraflores Lima, 18 PE	46,499	
Grant USAID 2011-05871	Peru Reflexion Democratica 527-A-00-08-00007	Jr Antonio Miroquesada 247 Oficina 512 Lima, 1 PE	36,140	
Grant NED 2014-07704	Bangladesh BWCCI 2007-330770404	Gulshan Grace House 8 Block -CWS C Appt 2C South Avenue Gulshan1 Dhaka, 1212 BG	20,000	

<b>Class of Activity</b>	<b>Recipient's name</b>	<b>Address</b>	<b>Amount</b>	<b>Relationship</b>
Grant NED 2013-07704	Macedonia Macedonian Women's Lobby 2007-330770403	11 Oktomvri num 42a/2 Skopje, 1000 MK	20,000	
Grant NED 2012-07704	Mali Femmes et Droits Humains 2007-330770402	PO Box 54a Kati, 1 ML	20,000	
Grant NED 2011-07811	Burma Political Defiance Committee 2008-2627811	PO BOX 125 Maesok Tak, 63110 TH	285,000	
Grant NED 2011-07730	South Africa SAIRR 2007-3307730	PO Box 31044 Braamfontein, 2017 SF	35,000	
Grant NED 2011-07718	China World China Institute 2007-3307718	8-1-5 Nanshangou Sanlihe Beijing, 100045 CH	50,000	
Grant NED 2011-07716	Burma Political Defiance Committee 2007-3307716	PO BOX 125 Maesok Tak, 63110 TH	150,000	
Grant NED 2011-07714	Sri Lanka Satyodaya Center 2007-3307714	30 Pushpadana Mawatha Kandy, 20000 CE	25,000	
Grant NED 2011-07711	Burma NLD-LA 2007-3307711	PO BOX 125 Maesok Tak, 63110 TH	14,590	

<b>Class of Activity</b>	<b>Recipient's name</b>	<b>Address</b>	<b>Amount</b>	<b>Relationship</b>
Grant NED 2011-07704	Colombia Women's Empowerment Network Cartagena 2007-330770401	De Indias and Bolivar CRA 10-32A-12 Office 502 Cartagena de IndiasBoliv, 1 CO	20,000	
Grant NED 2011-07632	Mali APSRU 2006-267763201	Quartier Hamdallaye rue 502 porte 163 Segou, 1 ML	50,000	
Grant NED 2011-07623	China World and China Institute 2006-2677623	8-1-5 Nanshangou Sanlihe Beijing, 100045 CH	49,987	
Grant DOS 2014-06472	Cuba Solidaridad Espanola con Cuba S-LMAQM-05-GR-045	Edificio Sompart Oficina 110 Ciudad Del Transporte Zaragoza, 50830 SP	180,976	
Grant DOS 2013-06472	Cuba Red Feminista Cubana Inc S-LMAQM-05-GR-04564722	1000 Ponce de Leon Blvd Suite 302 Coral Gables, FL 33134	85,000	
Grant DOS 2013-06412	China The Dui Hua Foundation S-LMAQM-05-GR-00364122	400 Sutter Street San Francisco, CA 94108	50,000	
Grant DOS 2012-06423	China World and China Institute S-LMAQM-08-GR-60664232	8-1-5 Nanshangou Sanlihe Beijing, 100045 CH	40,000	
Grant DOS 2011-06488	Iran Pontis Foundation S-NEAPI-07-CA-2006488	Grosslingova 59 Bratislava, 81108 LO	396,124	

<b>Class of Activity</b>	<b>Recipient's name</b>	<b>Address</b>	<b>Amount</b>	<b>Relationship</b>
Grant DOS 2011-06423	China The Dui Hua Foundation S-LMAQM-08-GR-60664231	400 Sutter Street San Francisco, CA 94108	200,000	

## TY 2007 Depreciation and Depletion Schedule

**Name:** International Republican Institute

**EIN:** 52-1340267

<b>Asset</b>	<b>Amount</b>
OFFICE EQUIPMENT	37,810
Leasehold Improvements	86,046
Development Software	1,766

**TY 2007 Land etc. Schedule****Name:** International Republican Institute**EIN:** 52-1340267

<b>Category/Item</b>	<b>Cost/Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>
OFFICE EQUIPMENT	257,355	253,685	3,670
Leasehold Improvements	568,525	255,511	313,014
Development Software	108,893	108,893	0

## TY 2007 Other Assets Schedule

**Name:** International Republican Institute

**EIN:** 52-1340267

Description	Beginning of Year Amount	End of Year Amount
DEPOSITS	127,866	120,883

## TY 2007 Other Changes in Net Assets Schedule

**Name:** International Republican Institute

**EIN:** 52-1340267

Description	Amount
grant refunds from previous years	25,225

**TY 2007 Other Expenses  
Not Included Schedule****Name:** International Republican Institute**EIN:** 52-1340267

Description	Amount
grant refunds from previous years	25,225

## TY 2007 Other Liabilities Schedule

**Name:** International Republican Institute

**EIN:** 52-1340267

Description	Beginning of Year Amount	End of Year Amount
deferred rent	724,825	649,100

**Form 990, Part VI, Line 90a - List the states with which a copy of this return is filed:**

List the states with which a copy of this return is filed

AK, AL, AR, AZ, CA, CO, CT, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Elizabeth Dugan 1225 eye street nw Washington, DC 20005	VP For Programs 40 00	140,862	19,241	0
Harold W Collamer 1225 eye street nw Washington, DC 20005	COO 40 00	162,692	16,764	0
Sonya Vekstein 1225 eye street nw Washington, DC 20005	CFO 40 00	157,692	26,511	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
Randy Scheunemann 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Joseph R Schmuckler 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Brent Scowcroft 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Margaret Tutwiler 1225 eye street nw Washington, DC 20005	director 1 00	0	0	0
Olin L Wethington 1255 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Richard Williamson 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Thomas Barba 1225 eye street nw Washington, DC 20005	General Council 1 00	0	0	0
Lorne W Craner 1225 eye street nw Washington, DC 20005	President 40 00	242,692	33,205	0
Judy Van Rest 1225 eye street nw Washington, DC 20005	Exec Vice President 40 00	176,231	21,707	0
Georges A Fauriol 1225 eye street nw Washington, DC 20005	Sr Vice President 40 00	155,981	24,652	0

## Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Senator Chuck Hagel 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Cheryl F Halpern 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
William J Hybl 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
stephan m minikes 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
The Honorable Jim Kolbe 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
MICHAEL KOSTIW 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Janet G Mullins Grissom 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Constance Berry Newman 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Alec L Poitevint II 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
John FW Rogers 1225 eye street nw washington, DC 20005	director 1 00	0	0	0

## Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Senator John McCain 1225 eye street nw Washington, DC 20005	Chairman 1 00	0	0	0
Peter T Madigan 1225 eye street nw Washington, DC 20005	Vice Chairman 1 00	0	0	0
J William Middendorf II 1225 eye street nw Washington, DC 20005	Secretary-Treasurer 1 00	0	0	0
L Paul Bremer III 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Gahl Hodges Burt 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Representative David Dreier 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Lawrence S Eagleburger 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Frank J Fahrenkopf Jr 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
Alison B Fortier 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0
James A Garner 1225 eye street nw Washington, DC 20005	Director 1 00	0	0	0

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 52-1340267

**Name:** International Republican Institute

### Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a banking fees	43a	137,215	134,832	2,383	
b contractual services	43b	9,191,197	9,072,632	118,565	
c EXPAT EXPENSE	43c	2,175		2,175	
d field office	43d	4,890,442	4,890,442		
e Internet	43e	606,074	574,743	31,331	
f insurance	43f	464,862	149,533	315,329	
g licenses and registrations	43g	28,482	14,759	13,723	
h other expenses	43h	8,563		8,563	
i moving	43i	400,616	400,616		
j polling	43j	2,237,274	2,237,274		
k participant costs	43k	270,531	270,531		
l professional services	43l	964,738	630,859	333,879	
m recruitment ads	43m	38,340	36,119	2,221	
n security services	43n	15,402,835	15,402,835		
o software	43o	59,862	22,288	37,574	
p subscriptions	43p	128,488	85,677	42,811	
q subcontractors	43q	2,014,732	2,014,732		
r training	43r	110,484	37,222	73,262	